## DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-01-16 Baltimore, Maryland 21244-1850



## Division of Integrated Health Systems, Family and Children's Health Programs Group, CMSO

February 24, 2003

Mr. Mike Robinson, Commissioner Cabinet for Health services Department of Medical Services Department for Medicaid Services 275 E. Main Street Frankfort, KY 40621-0001

Dear Commissioner Robinson:

This letter pertains to your renewal application for Kentucky's Section 1915b nonemergency transportation program. In the cover letter you submitted with your renewal application on December 6, 2002, you requested that CMS grant a 90day temporary extension in the event that additional information was needed from the State in order to evaluate your application.

On February 12, 2003, our Atlanta Regional Office sent you a letter requesting additional information. In order to provide the time necessary for the State to respond to that request, I am granting a 90-day temporary extension of this waiver program. Since the current waiver authority expires on March 7, 2003, the extension will be effective for the period March 8, 2003, through June 5, 2003.

If you have any questions or need further information on this matter, feel free to contact Rhonda R. Cottrell, Associate Regional Administrator for the Division of Medicaid and State Operations in our Atlanta Regional Office, at (404) 562-7175.

Sincerely.

Michael Fiore Director

cc: Marsha Montague, Atlanta RO Claudia Lamm, CO Gloria Smiddy, CO